



State of New Hampshire

DEPARTMENT OF SAFETY

Richard M. Flynn, Commissioner of Safety

Division of State Police

James H. Hayes Safety Building, 10 Hazen Drive, Concord, NH 03305

271-2575

Speech/Hearing Impaired
TDD Access: Relay NH
1-800-735-2964

Colonel Gary M. Sloper
Director

Dear Sir or Madam:

The Criminal Records Central Repository collects and distributes criminal history record information (CHRI). CHRI consists of descriptions and notations of arrests, detentions, indictments, information's, formal criminal charges and subsequent dispositions. CHRI is forwarded to the repository from criminal justice agencies throughout the state. In addition, the repository tracks information pertaining to sentencing, correctional supervision and release.

Several tiers of rules govern the collection and dissemination of CHRI including the Code of Federal Regulations, the New Hampshire Code of Administrative Rules and state statutes to include RSA 106-b:14 and RSA 106-b:7,1(b). Based upon these rules, law enforcement personnel, or an individual requesting his or her own CHRI, will receive both non-conviction and conviction data. Additionally, any individual or agency may receive the **CONVICTION INFORMATION** of another, provided that they produce a notarized **CRIMINAL RECORD AUTHORIZATION FORM** signed by the individual whose record is sought.

To assist you with this transaction, I have enclosed a copy of the required **CRIMINAL RECORD RELEASE AUTHORIZATION FORM**. Requests sent in by mail **MUST HAVE SECTION II COMPLETED**. You may copy the Criminal Record Release Authorization Form as your needs dictate. A ten dollar (\$10.00) fee is charged for **EACH** record request. Please make checks payable to NHSP-CRIMINAL RECORDS.

To expedite the return of your request, please include a **self addressed envelope**.

Please feel free to call (603) 271-2538, if you have any questions or if I can be of further assistance. Thank you for your anticipated cooperation.

Sincerely,

Jeffrey R. Kellett, Administrator
State Police Criminal Records Unit

Enclosure

New Hampshire Department of Safety
DIVISION OF STATE POLICE
Central Repository for Criminal Records
10 Hazen Drive, Concord, NH 03305

CRIMINAL RECORD RELEASE AUTHORIZATION FORM

SECTION I

PLEASE TYPE OR PRINT CLEARLY, ALL INFORMATION IN THIS SECTION **MUST BE COMPLETED**

NAME _____
LAST (MAIDEN) FIRST MI

ADDRESS _____
STREET CITY STATE ZIP CODE

DATE OF BIRTH _____ HAIR COLOR _____ EYE COLOR _____

DRIVER LICENSE NUMBER _____ STATE _____

By signing below you are certifying that you are the individual listed above and that the information provided is true.

YOUR SIGNATURE: _____ DATE _____
Signed under penalty of unsworn falsification pursuant to RSA 641:3.

SECTION II

IF RECORD IS TO BE MAILED TO YOU, OR RECEIVED BY SOMEONE OTHER THAN YOURSELF,

ALL OF SECTION II MUST BE COMPLETED

I hereby authorize the release of my criminal record conviction(s), if any, to the following individual:

NAME OF PERSON / FIRM TO RECEIVE RECORD _____

ADDRESS _____
STREET CITY STATE ZIP CODE

YOUR SIGNATURE _____ DATE _____

NOTARY'S SIGNATURE _____ DATE _____
(Affix Seal) (Comm. Exp.)

SIGNATURE OF PERSON / FIRM TO RECEIVE RECORD DATE _____

NOTE: A \$10.00 fee is required for each request - make checks payable to: State of NH – Criminal Records